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**UTILITY PATENT APPLICATION TRANSMITTAL**

(for new applications under 37 C.F.R. § 1.53(b))

Customer Number: 000201  
Attorney Docket Number: C6663(C)  
Applicant: Jaimee Terese SIMONE, Edward John GIBLIN and Craig CICCARI  
For: CLOSURE WITH SOFT FEEL GRIP  
Express Mail Label No.: ER 761 555 229 US  
Date Deposited: December 30, 2003  
UNUS #: 03-D320-EDG/D  
Assignee: Unilever Home & Personal Care USA

To: Commissioner for Patents  
Box: Patent Application  
P.O. Box 1450  
Alexandria, VA 22313-1450

**APPLICATION ELEMENTS**

1. ☒ Fee Calculation (Box 13) and Authorization (Triplicate copies of this form are enclosed)
2. ☒ Specification and Claims (11) Total Pages
3. ☒ Informal Drawings (2 ) Total Sheets
4. ☒ Executed Declaration
5. ☐ Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper copy (identical to computer copy)
  - c. ☐ Statement verifying identify of above copies.

**ACCOMPANYING APPLICATION PARTS**

6. ☐ Information Disclosure Statement (IDS)/PTO-1449
7. ☐ Copies of IDS citations
8. ☐ Preliminary Amendment
9. ☒ Two (2) Return Receipt Postcards
10. ☐ Certified Copy of Priority Document
11. ☐ The benefit under 35 U.S.C. § 119 is claimed of the filing of:
12. ☐ Other:
13. ☒ The FILING FEE (including any claims introduced or cancelled by Preliminary Amendment) is calculated below:

CLAIMS					
FOR	NUMBER FILED		NUMBER EXTRA	RATE	BASIC FEE \$770.00
Total Claims	15 - 20			X \$ 18.00	
Independent Claims	1 - 3			X \$ 86.00	
Multiple Claims	<u>Yes</u>	<u>No</u>		X \$290.00	
TOTAL FILING FEE . . .					\$770.00

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14. [X] Charge \$770.00 to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.
15. [X] The Commissioner is hereby authorized to charge any additional fees, which may be required, including all required fees under  
[X] 37 C.F.R. § 1.16;  
[X] 37 C.F.R. § 1.17;  
[X] 37 C.F.R. § 1.18.
16. [X] **Correspondence Address:**  
Customer Number: 000201

Respectfully submitted,



Kevin J. Stein  
Attorney of Record  
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